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| APPLICANTS | | | , | | | | | | |
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| ** CONTINUING DATA ********************************** | | | | | | | | | |
| ** FOREIGN APPLICATIONS ************************************ | | | | | | | | | |
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| Foreign Priority claimed 35 USC 119 (a-d) cond met Verified and Acknowledged | litions | yes no Met aft | er tials | STATE OR COUNTRY SWITZERLAN | DR | IEETS AWING 2 | TOT CLA 2 | IMS | INDEPENDENT CLAIMS 3 |
| ADDRESS 25763 DORSEY & WHITELLECTUAL 50 SOUTH SIXTH MINNEAPOLIS, 55402-1498 | PRO H STI | PERTY DEPARTMEN | Т | | | | | | |
| TITLE Multi-layered plas | stic b | ody for medical applica | itions | | | | | | |
| FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT FILING FEE No for following: RECEIVED | | | | | | All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) | | | |

| 918 | ☐ 1.18 Fees (Issue) |
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| | Other |
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